

Health Officer News

February 2011

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Message from the State Health Commissioner

In these tough economic times, many local health departments (LHDs) are facing shrinking budgets while the community's need for public health programs is increasing. We understand LHDs are looking for new opportunities to increase revenue. Some LHDs have had success in billing Medicare and Medicaid. In this month's "Hot Topics" section, we cast a spotlight on the Dubois County Health Department, population 41,419 (2009 estimate from the U.S. Census Bureau), who has been billing Medicaid and Medicare Part B since 2006 and added Medicare Part D since 2009. In 2010, they receipted more than \$49,000 from billing Medicaid and Medicare for services that they used to provide at no charge. While it does take valuable resources to set up your LHD to be able to bill Medicaid and Medicare, we think that the final outcome is worth the initial investment. In addition, we will have a representative from HP Enterprise Services, the company that provides support for Hoosier Healthwise and Medicaid, presenting and answering your questions at the upcoming ISDH Health Officer meeting on Wednesday, March 30th. We hope that this information provides you with different ideas and opportunities to create new funding streams for your LHD and allows you to continue providing essential public health services to the residents of Indiana.



Greg Larkin,
MD, FAAFP
State Health
Commissioner

Hot Topics in Public Health

Local Health Departments looking for new ways to increase revenue might want to look into billing Medicaid for services. Dubois County (District 10) began billing Medicaid and Medicare Part B billing in 2006 and Medicare Part D in 2009. According to Dubois County Administrative Director, Donna Oeding, "While setting up Medicare and Medicaid was a challenging process and the paperwork was challenging, it was well worth it." In 2010, the county collected approximately \$24,000 from Medicaid, \$15,000 from Medicare Part B and just over \$10,000 for Medicare Part D. In addition, fees charged and received by various divisions such as immunizations, birth and death certificates, septs and food permits have grossed approximately \$340,000. This makes the income from Medicaid and Medicare approximately 14% of last year's earnings. In addition, the County Council utilized Economic Development Income Tax (EDIT) funds to assist in the purchase of medical supplies for the health department. As a result, these steps have allowed Dubois County to become more financially stable.

For questions or more information, contact Donna Oeding, Administrative Director, Dubois County Health Department at 812-481-7069 or email her at dchealth@psci.net.

Epidemiology Update

- **Data Analysis:** Because of the large sample size of the Indiana Behavioral Risk Factor Surveillance System (BRFSS) data available for 2009, data from two more counties – Allen and Vanderburgh – are now available from the SMART BRFSS site at <http://apps.nccd.cdc.gov/BRFSS-SMART/>.
- **Surveillance/Investigation:** The communicable disease reporting rule is being reviewed for revision. Ryan Li, Assessment Epidemiologist, joined the division on January 3, 2011 to assess and analyze immunization coverage rates across the state.
- **Chronic Disease Epidemiology:** New fact sheets describing the epidemiology of various chronic diseases in Indiana can be found on the ISDH Web site at: www.chronicdisease.isdh.in.gov under the “Publications” link.

Division Profile: Epidemiology Resource Center

More than 50 epidemiologists and administrative staff in five divisions serve in the ISDH **Epidemiology Resource Center (ERC)**. Providing 24/7 response capability, the **Surveillance and Investigation Division** conducts surveillance and investigates outbreaks of infectious diseases and syndromes. The **Data Analysis Team** analyzes data from birth; marriage, death, and hospital discharge datasets and manage the Behavioral Risk Factor Surveillance System (BRFSS) survey to detect trends in health behaviors and risk factors among Indiana adults. The **Zoonotic/Environmental Epidemiology Division** conducts vectorborne disease surveillance, including mosquitoborne and tickborne diseases, bedbugs, animal bites, and rabies. This division also tests and monitors indoor air quality and assesses different types of suspected environmental exposures. The **Public Health Geographics Division** provides data analysis and visualizations that describe health inequality, disparity or burden within a geographic area. The ability to pinpoint neighborhoods can offer effective intervention efforts to improve health outcomes. The newly formed **Chronic Disease Epidemiology Division** monitors and analyzes data related to chronic conditions, including asthma, diabetes, cancer, cardiovascular disease, and obesity, maternal and child health, and women, infants, and children (WIC). The **Health Disparities Epidemiologist** also provides epidemiologic support to analyze and monitor indicators reflecting disparities by race, ethnicity, gender, age, and other factors. All ERC divisions serve to collect, analyze, interpret and distribute meaningful data and data-based recommendations to ISDH programs, agency partners and stakeholders, and the public.

For more information, please contact Pam Pontones, State Epidemiologist, at 317-233-7861 or ppontones@isdh.in.gov.

Local Health Department Outreach Division's Mission

The Local Health Department Outreach Division strengthens the partnerships between the Indiana State Department of Health and the local health departments through multiple modes of communication, education and training, and customer service.

Local Health Department Outreach Division: Using the LHD Resource SharePoint Website

The Local Health Department Outreach Division manages the LHD Resource SharePoint website. SharePoint is a web-based site used to help improve communication and access to data and information. The LHD Resource SharePoint website has general announcements, a training calendar, and a page for Health Officer information. If you have further questions regarding the website, you can contact the, Jessica Trimble, Director of the Local Health Department Outreach Division, at jtrimble@isdh.in.gov or 317-234-6623. You may also contact the division at 317-234-2785 or LHDinfo@isdh.in.gov.

The following resources are available on the LHD Resource SharePoint website:

ISDH Training Calendar which includes webcasts and meetings.

Information from past ISDH Health Officer meetings and upcoming Health Officer meetings.

Archived Health Officer Monthly Newsletters.

State Forms and grant documents.

Weekly reports on influenza and pertussis

LHD Resource SharePoint Weblink: <https://myshare.in.gov/ISDH/LHDResource>

Next Health Officer Meeting:

For more information, please join us at the ISDH Spring Health Officer Meeting on March 30, 2011 at Fort Harrison's Garrison House, 6002 North Post Road, Indianapolis, Indiana, 46216. There are sleeping rooms available around the corner at Fort Harrison Park Inn. To reserve a room, you may contact the Inn at (317) 638-6000. The room block will expire on March 18, 2011.

Please view the Health Officer Meeting Agenda and register online at
<https://www.surveymonkey.com/s/2011HealthOfficerMeetingRegistration>

Local Health Maintenance Fund and Tobacco Settlement Update:

As stated in the January Health Officer News, the Local Health Department Outreach Division manages the Local Health Maintenance Fund Grant and the Tobacco Settlement Grant. Based on feedback from LHDs, we are updating the guidance, applications, and annual report forms for both grants. This will also include budget revision forms and requests to spend carry-over funds. Local Health Maintenance Fund documents will be made available in late March 2011 and Tobacco Settlement documents will be made available in late April 2011. All documents will be posted on the LHD Resource SharePoint site and sent electronically to all LHDs. We will also provide grant trainings at the upcoming Public Health Nurse Conference in May, host webcasts, and, if necessary, will be available to make site visits to train LHD staff. In addition to providing live training, training modules will be posted on the LHD Resource SharePoint site.

<https://myshare.in.gov/ISDH/LHDResource/LHD%20Trust%20Fund/Forms/AllItems.aspx>

If you have any questions, please contact Kathryn Nicely, Grant and Education Manager, at knicely@isdh.in.gov or 317-233-7570.



Dr. Daniel Nafziger
Health Officer, Elkhart County

Health Officer Profile:

In this issue, we are highlighting Infectious Disease physician, Dr. Daniel Nafziger. He has been the Health Officer since August 2009. In addition to being a Health Officer, he is still a practicing physician.

- **What's the most rewarding thing you found working as a Health Officer?** Knowing how much wonderful work gets done by all employees...seeing that result in fewer infections, better fed citizens and a host of positive outcomes.
- **What is the most challenging thing you found working as a Health Officer?** A declining budget given our county's falling income and property taxes.
- **What advice would you give a new Health Officer?** "I still consider myself a new Health Officer, but I'd say learn all you can from the more experienced Health Officers."
- **What is one thing you wish you were told before accepting the appointment as Health Officer?** Get an early start on finding out who really doesn't like the health department so that you find ways to work with them and prove the value of public health.
- **What else would you like us to know about you?** I have a lovely wife, four bright beautiful, young adult children and an energetic Bull Mastiff.

To highlight a Health Officer in your area, please contact the LHD Outreach Division or submit suggestions via email at LHDInfo@isdh.in.gov.

Office of Public Health Performance Management: County Health Rankings

March 2011 will be the launch of the second year of the County Health Rankings report. The report is produced by the University of Wisconsin Population Health Institute and funded by the Robert Wood Johnson Foundation. The goal of the county health rankings is to provide information at the county level that will spark the community into "Mobilizing Action Toward Community Health."

The County Health Rankings examines health factors, such as health behaviors, clinical care, social and economic factors, and physical environment. The impacts of these identified health factors have a direct relationship to the mortality and morbidity health outcomes of every county.

While you are waiting for the County Health Rankings to be announced on **March 30th**, gather your partners (e.g., hospitals, schools, business community members, public officials, and/or nonprofit groups/coalitions) to develop talking points and a plan on how to address the strengths and weaknesses of your county. Once the rankings are released, gather all the key stakeholders and develop a plan to: a) assess needs and resources; b) pick priorities; c) find programs and policies that work (best practice); d) implement strategies; and e) evaluate.

If your health department or county have questions or concerns about the County Health Rankings, the Office of Public Health Performance Management is here to help. For more information, contact Kristin Adams, Ph.D., Director of the Office of Public Health Performance Management, at kadams@isdh.in.gov or 317-233-9250.

Legislative Update:

The 2011 Legislative Session began in January. This year is known as the “Long Session” and includes the crafting of the state’s two-year budget. Due to the economy, there will be little or no increases in spending, but ISDH does have several initiatives in Senate Bill 366. SB 366 includes the Wellness Tax Credit, changes to the Death Registry, and the combining of ISDH counsels. You can read a summary as well as the entire bill here:

<http://www.in.gov/apps/lisa/session/billwatch/billinfo?year=2011&session=1&request=getBill&docno=366>

6. The entire bill list for the General Assembly is here:

<http://www.in.gov/apps/lisa/session/billwatch/billinfo?year=2011&session=1&request=all>

Food Protection Legislation:

Food Safety Bill

The Food Protection Program (FPP) continues to provide training and technical assistance to LHDs as needed in addition to maintaining an inspection inventory of more than 1000 facilities across the state. The FPP continues to conduct outreach via the *FoodBytes* newsletter and published guidance documents to assist the LHDs in the state. The FPP website provides a tremendous amount of information for the LHD and the food industry as well as consumers. Please visit at <http://www.in.gov/isdh/20640.htm>

A Congressional bill was recently passed and signed into law by President Obama. **The FDA Food Safety Modernization Act of 2010** provides the most sweeping changes to the FDA in more than 60 years and will most likely affect ISDH Food Protection operations. New enhanced partnerships are to focus on the importance of strengthening existing collaboration among all food safety agencies – federal, state, local, territorial, tribal and foreign to achieve its goals. It is hoped that grant funding for state capacity building and direct training will be available in the future.

Mandatory recall authority allows the FDA to order a product out of the market. Preventive control procedures require food facilities to evaluate hazards and implement effective measures to prevent contamination. Companies will be held to “should have known” or “reasonable belief” standards for ensuring they have taken precautions to prevent intentional **or** accidental contamination. FDA is required to establish science-based standards for the safe harvesting of produce to minimize risk down to the farm level. Retail food establishments will not be covered under these new requirements.

Inspection and Compliance requires risk-based inspections and mandatory two-year record keeping. Reportable Food Registry improvements will provide more rapid notification to consumers. Imported food and certification requirements of foreign food manufacturers requires importers to perform supplier verification activities and incentives for importers to take additional food safety measures by directing FDA to establish a voluntary program through which imports may receive expedited review of their shipments if the importer has taken certain measures to assure the safety of food. FDA must double its inspections for foreign firms each year, beginning in 2011, and provides for accreditation of qualified 3rd party auditors to certify compliance.

For more information, please contact Scott Gilliam, Director, Food Protection Division, at sgilliam@isdh.in.gov or 317-233-7467.

Newcomers and Retirees:

Welcome to our new Health Officers/Administrators

Dr. Paul Broderick, Health Officer, Morgan County

Dr. Camillo Mark Mendoza, Clay County

Joshua Williams, Administrator, Delaware County

Retiring

Jill Carroll, RN, Clinton County

Dr. S. Rahim Farid, Health Officer, Clay County

Correction:

Dr. Ringenberg remains Health Officer for Huntington County and Joe Rakoczy is the new Administrator.

Retirement of Senior Medical Entomologist:

Michael J. Sinsko, Senior Medical Entomologist, Zoonotic and Environmental Epidemiology, will be retiring this month. A retirement reception will be held Friday, February 25, 2011 from 11am -1pm at the Indiana State Department of Health in Rice Auditorium. Over the past 34 years many of you have had the pleasure of working with Dr. Sinsko. Please join us on the 25th to celebrate his years of service.

Dr. Sinsko received his Ph.D. from the University of Notre Dame, his M.S. from Eastern Illinois University, and his B.S. from Loyola University. Prior to joining the department he worked on malaria eradication for five years in Thailand, Vietnam, and the Philippines. Dr. Sinsko joined the department in 1976 after an outbreak of Saint Louis encephalitis struck the Midwest. When he joined the department he helped to establish the entomology division and has remained an active director of that division. He has been instrumental in the development of many of the local vector control programs across the state, starting with Marion County in 1976. In 1986 he was involved in the investigation and discovery of the first *Aedes albopictus* in Indiana, a competent vector of dengue and the primary vector of chikungunya. Discoveries such as these help us to know what diseases we could be at risk of acquiring in Indiana. Many health departments relied on Dr. Sinsko's expertise during the emergence of West Nile virus in animals and humans in 2002. In addition to his knowledge and experience with mosquitoes, surveillance, and vector control he has also served as a subject matter expert for many local health departments on a variety of other insects including ticks, parasites, the use of pesticides, and many more topics. He served on the Indiana Pesticide Review Board for 21 years. Dr. Sinsko will be missed by many across the state.

Please contact Jennifer House, jhouse@isdh.in.gov or 317-233-7272, for additional details concerning Dr. Sinsko's retirement reception.

Upcoming Events for 2011

ISDH-LHD Webcast	Feb 11
Retirement Reception – Dr. Sinsko	Feb 25
Newsletter info entry deadline Mar 2011	Feb 28
ISDH-LHD Webcast	Mar 11
TB Symposium	Mar 24
ISDH Spring Health Officer Meeting	Mar 30
Public Health Week Conference	Apr 5-6
ISDH-LHD Webcast	Apr 8
Indiana Environmental Health Association	
Spring Conference	Apr 13
Good Friday (ISDH Closed)	Apr 22
Primary Election Day (ISDH Closed)	May 3
ISDH-LHD Webcast	May 13
Public Health Nurse Conference	May 18-19
Memorial Day (ISDH Closed)	May 30

Our Mission

The Indiana State Department of Health supports Indiana's economic prosperity and quality of life by promoting, protecting and providing for the health of Hoosiers in their communities.

Have comments, ideas, or questions? Send them to Cheryl Moore, LHD Outreach Division, cmoore1@isdh.in.gov.